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Bib Data Sheet

CONFIRMATION NO. 8742

<b>SERIAL NUMBER</b> 10/075,429	<b>FILING DATE</b> 02/13/2002 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> 3-31105A
<b>APPLICANTS</b> Rosa Martani, Divonne-les-Bains, FRANCE; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CON OF PCT/EP00/07934 08/14/2000 <b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 99810738.7 08/17/1999 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/02/2002</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>S.T</u> Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 26 <b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 001095				
<b>TITLE</b> Rapidly dissolving dosage form and process for making same				
<b>FILING FEE RECEIVED</b> 848	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	